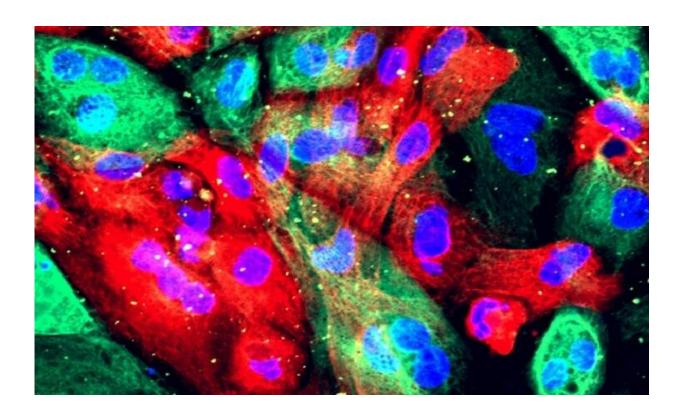


Prostate cancer patients face financial toxicity: Who is affected and how do they cope?

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Prostate cancer cells. Credit: NIH Image Gallery

Fifty percent of patients with metastatic prostate cancer experience some level of financial hardship due to their treatment, according to a study in the August issue of *The Journal of Urology*, an Official Journal of the



American Urological Association (AUA).

"Our findings help in understanding the rates of and <u>risk factors</u> for financial <u>toxicity</u> among <u>patients</u> with <u>advanced prostate cancer</u>, along with the coping mechanisms, including the impact on personal spending, experienced by those reporting higher levels of financial toxicity," comments senior author Stephen A. Boorjian, MD, of Mayo Clinic, Rochester, Minn.

"Our most significant finding may be that patients experience financial toxicity despite their ability to remain compliant with <u>treatment</u>," says lead author Daniel D. Joyce, MD. "Simply asking patients whether they are following their suggested treatments is not sufficient to screen for financial toxicity."

New data on financial toxicity rates, risk factors, and coping strategies

The researchers administered a validated questionnaire concerning financial toxicity to all patients seen at their advanced <u>prostate</u> cancer clinic over a three-month period. Financial toxicity—which has been defined as "the harm to patients that results from treatment costs"—has become recognized as important patient-centered outcome. Previous reports suggest that up to half of cancer survivors are affected by financial toxicity, which has been linked to increased rates of adverse treatment outcomes.

Drs. Joyce and Boorjian and colleagues assessed the rate of financial toxicity and the related patient characteristics and coping strategies among patients being treated for <u>metastatic prostate cancer</u>. The analysis included responses from 281 patients, median age 69 years.



Based on the study questionnaire, 79 patients were classified as having high financial toxicity. Overall, 54% of patients said they experienced at least some level of financial hardship related to their cancer treatment. The impact was "more profound" among patients with high financial toxicity, with 89% percent reporting financial hardship.

Patients may make 'profound personal sacrifices' to remain compliant with prostate cancer treatments

Several patient characteristics were associated with higher or lower risks of financial toxicity. Older patients had lower financial toxicity, as each additional year of age was associated with a 25% reduction in risk. For patients who were married (or had a non-married partner), financial toxicity risk was nearly four times lower than for those who were unmarried, widowed, or divorced. Not surprisingly, income was a significant factor: risk of financial toxicity was nine times lower for patients with annual incomes of \$100,000, compared to incomes under \$20,000.

Patients experiencing high financial toxicity coped in varied ways. They were more likely to decrease spending on basic goods and <u>leisure</u> <u>activities</u>, to use their savings to pay for <u>medical care</u>, to delay filling prescriptions, and to borrow money to pay for their care. "Notably, very few patients reported only partially filling medications or stopping medications altogether due to cost," the researchers write.

More than half of patients with high financial toxicity reported difficulty paying bills—and patients in this group were more likely to have delays in starting cancer treatment. Patients with high financial toxicity were also more likely to use financial assistance programs: 32%, compared to 12% of those with low financial toxicity. "Patients are often unable to meet the high treatment initiation costs without some type of financial



assistance program or subsidy," the researchers write.

Dr. Joyce comments: "Some patients may be making profound personal sacrifices in order remain adherent with their prostate cancer treatment, which may have a significant impact on the quality of life that we hope to prolong with these treatments. Conversations about these issues are even more crucial given the observed improvement in financial toxicity among patients in our study who were able to access financial assistance programs."

The researchers highlight the need to identify factors that may mitigate the financial impact of treatments for metastatic prostate <u>cancer</u>. They conclude: "Such data are crucial to understand how to include financial toxicity in shared decision-making and to guide future interventions designed to reduce financial toxicity in this population."

More information: Daniel D. Joyce et al, Coping Mechanisms for Financial Toxicity Among Patients With Metastatic Prostate Cancer: A Survey-based Assessment, *Journal of Urology* (2023). DOI: 10.1097/JU.00000000000003506

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